

ORIGINAL

KUNTZ, J.

SCANLON, M.J.

~~EASTERN~~ UNITED STATES DISTRICT COURT
~~SOUTHERN~~ DISTRICT OF NEW YORK
~~EASTERN~~

WEBSTER DRUMMOND
1500 HAZEN ST E. ELMHURST 11370
441 18 080 96

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

CV 19-3193
COMPLAINT

under the
Civil Rights Act, 42 U.S.C. § 1983

(Prisoner Complaint)

201 P 009 175

Jury Trial: ☒ Yes ☐ No

(check one)

17TH
PCT NASSAU COUNTY Jail
POLICE DEPT MINERVA
N.Y. 11501
OFFICER (1) JOHN DOE
OFFICER (2) JOHN DOE
OFFICER (3) JOHN DOE
OFFICER (4) JOHN DOE

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

RECEIVED
MAY 17 2019
PRO SE OFFICE

I. Parties in this complaint:

A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name WEBSTER DRUMMOND
ID # 441 18 080 96
Current Institution N.Y.C. 1500 HAZEN ST
Address EAST ELMHURST 11370
QUEENS N.Y.

B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name Soltat Doe #1 Shield # _____
Where Currently Employed 4TH PCT NASSAU COUNTY
Address NASSAU COUNTY POLICE DEPT
MINEOLA, NEW YORK 11501

Defendant No. 2

Name JOHN DOE #2 Shield # _____
Where Currently Employed 4TH PCT NASSAU COUNTY
Address NASSAU COUNTY POLICE DEPT
MINEOLA, NEW YORK 11501

Defendant No. 3

Name JOHN DOE #3 Shield # _____
Where Currently Employed 4TH PCT NASSAU COUNTY
Address MINEOLA, NEW YORK 11501
NASSAU COUNTY POLICE DEPT

Defendant No. 4

Name JOHN DOE #4 Shield # _____
Where Currently Employed 4TH PCT NASSAU COUNTY
Address NASSAU COUNTY POLICE DEPT

Defendant No. 5

Name _____ Shield # _____
Where Currently Employed _____
Address _____

II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur? 4TH PCT NASSAU COUNTY MINEOLA NY 11501

B. Where in the institution did the events giving rise to your claim(s) occur? LYNDBROOK LONG ISLAND

C. What date and approximate time did the events giving rise to your claim(s) occur? OCTOBER 24TH 2018 3:45-4:00 PM

To:

At a Term of the Supreme Court, held in
and for the County of _____, at the
County Courthouse thereof, at the City of
New York, on the _____ day of
_____, 20____

Present: Hon. _____, Justice
SUPREME COURT STATE OF NEW YORK
COUNTY OF NASSAU

DRUMMOND WEBSTER,
Claimant

-against-

4TH PRECINCT DEPARTMENT, NASSAU
The City of New York

Index No.: _____
Order

Upon the affidavit of DRUMMOND WEBSTER, sworn to the 13 day of April
2019, the proposed Notice of Claim against New York City, duly verified on the 3 day of
April 2019, and upon supporting documents.

Let the City of New York, show cause at a Special Term, Part _____, the Supreme Court,
to be held in the NASSAU County Supreme Court Chambers, No. _____, on
the _____ day of _____ 2019, at 9:30 o'clock in the forenoon or as soon
thereafter as counsel can be heard why an order should not be granted, pursuant to General
Municipal Law §50-e(5), permitting and allowing the service of the proposed late Notice of Claim
herein annexed to this application upon the City of New York, after the expiration of the statutory
period for such service, and for such other and further relief as the Court deems just and proper in
the premises.

Service of the copy of this Order to Show Cause, together with the supporting papers herein
referred to on either the name pursuant to CPLR 311(5), and the General Municipal Law §50-e(3),
by personally delivering in CPLR 311(5) on or before the 26 day MARCH, 2019,
shall be timely and sufficient.

Enter,

Webster
J.S.C.

AFFIDAVIT OF SERVICE

**STATE OF NEW YORK)
COUNTY OF BRONX) ss:**

I, DRUMMOND WEBSTER, being duly sworn deposed and states:

That I have on the 26 day of March, 20 19, placed and submitted the original and copies of this motion to be duly mailed via the United States Postal Service, through the institutional mailroom of the N.I.C., 1500 HAZEN STREET,. Said moving papers were mailed to the following concerned parties:

Comptroller of the City of New York
Municipal Building, Room 1225S
1 Centre Street
New York, New York 10007

Bronx County Hall of Justice
Supreme Court - Civil Division
Writ Court Clerk
265 East 161st Street
Bronx, New York 10451

EASTERN DIST. of
4TH DIST. NASSAU County
MINERVA NY 11501

Yours, etc...


**CLAIMANT
DRUMMOND WEBSTER**

Sworn to before me this
26 day of March, 20 19.


NOTARY PUBLIC / COMMISSIONER OF DEEDS

ROSE ADEWUNMI
Registration #01AD6347266
Qualified in Queens County
Commission Expires Aug. 29, 2020

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NASSAU: TERM PART

-----X
DRUMMOND WEBSTER

CLAIMANT

4th Precinct Nassau County Police Dept
THE CITY OF NEW YORK

Claim
2012009175
NOTICE TO FILE A
MOTION OF CLAIM

#: _____

-----X
PLEASE TAKE NOTICE, that the above named claimant DRUMMOND WEBSTER, will move this Court upon the affidavits of MOTION TO FILE A CLAIM, duly sworn on the _____ day of _____ 2019, and upon any supporting documents, and upon the annexed copy of the proposed Notice of Claim duly verified on the _____ day of _____, 2019, at a Special Term, Part, of the Supreme Courthouse held in and for the County of NASSAU, located at _____, on the _____ day of _____, 2019, at 9:00 o'clock in the forenoon of that day or as thereafter as Counsel can be heard for an ORDER pursuant to General Municipal Law § 50-e(5), granting leave at this time to serve the annexed proposed Notice of Claim, being the statutory period for such service specified in the General Municipal Law § 50-e(5), granting as the release and for such other relief as this Court may deem just and proper.

As for the 4th precinct in Nassau County Jail and Police Department located 4th Precinct Nassau County, Police Department, Mineola

STATEMENT OF FACTS

On or about 4:00 o'clock on October 24, 2018 I was pulled over as I was traveling down LYNBROOK LONG ISLAND, and for a failure to use turn signal.

At that juncture I was told By the Officer that I had a warrant, "Parole Warrant" at which time I was taken into custody where I spent from October 24, 2018 to December 05, 2018 at which time I was released. I tried to explain to the Officer that I had "Maxed out on my Parole".

I went to court and was released three day for "time served" however, I was taken back to the facility, at no time did I receive a ticket for a moving violation I was now being detained in which on several occassion I explained I maxed Out on my Parole so now I spent 42 more days as I was being Kidnapped against my will at the faccility.

Please Take Notice, that I spoke with the Officers at the fourth pct., to no avail as it went on being ignored. At no time did the 4th pct. request license, registration of any information for my I.D. until at the 4th pct, in Nassau County jail.

I respectfully demand to perserve any and all my rights Civil, Constitutional, Common Law, God-given birth rights and bill of rights, "as de jure" and recourse and remedies under the law.

I wish to be compensated for the sum of \$ 500,000.00 dollars for the pain and suffering placed upon me required of trust of this wrong doing.

Uponn returing to Court three (3) days later the Judge then gave this writer "TIME SERVED" and I spoke with the Officers and the jail and no one would try to hear me, so I spent 42 more days against my will being kidnapped for a Parole Warrant that wasn't correct and the time was completed


ALTERNATIVELY, taken away my first and sixth amendment of the Consitution of life, liberty and pursuit of happiness.

Again, Your Honor, I am unschooled in the matters of law and notice the Court of Enunciation of principles as stated in HAINS v. KERNER (404 U.S. 519) whereas the Court has directed that those who are unschooled in the law making pleadings and /or complaint shall have the court look to the subestance of the pleadings rather than the form.

As I do not consent to those proceedings being taken against my will grant request that I am demanding \$500,000.00 for this great requirement of lose, and harmony.

PLEASE TAKE NOTICE, that inasmuch as the within motion papers are served upon you at least ten (10) days before the motion returned date heretofore, you are hereby requested to serve answering affidavits, if any, at least five (5) days, before the return date pursuant to Civil Practice Law and Rules.

DATED: ,2019
NASSAU COUNTY, NEW YORK


DRUMMOND WEBSTER
N.I.C. 1500 Hazen Street
East Elmhurst, New York
11370

D. Facts:

SEE ATTACHED PAPERWORK
OF CLAIM & AFFIDAVIT

Was
injured
if not?

Was
injured
if not?

Was
injured
if not?

Was
injured
if not?

III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

TRAUMA LOSS OF PROPERTY LOSS OF FAMILY
MEMBER LOSS OF FAMILY AIRLOOMS.
(OVERALL STRESS.)

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes No ☒

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

NASSAU COUNTY JAIL

9. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?
Yes ☒ No ☐ Do Not Know ☐

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?
Yes ☒ No ☐ Do Not Know ☐

If YES, which claim(s)? THE HOLDING OF ME IN PRISON

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?
Yes ☒ No ☐

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?
Yes ☐ No ☒

If you did file a grievance, about the events described in this complaint, where did you file the grievance?
I EXPLAINED I WAS BEING DETAINED FOR NO REASON

1. Which claim(s) in this complaint did you grieve? BEING DETAINED

2. What was the result, if any? NONE

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process.
I WROTE TO EVERY DEPARTMENT IN NASSAU COUNTY JAIL

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: THEY TOLD ME THAT THE JAIL DID NOT DEAL WITH PAROLE MATTERS

2. If you did not file a grievance but informed any officials of your claim, state who you

informed, when and how, and the i r response, if any: I WAS TOLD
THEY DIDNT DEAL WITH PAROLE
AND NO ONE OR PAROLE DEPT WAS
AVAILABLE AT THE JAIL

5. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

ME CALLING HUMAN RESOURCES
PAROLE/NASSAU BAR ACCOS.

Note: You may attach as exhibits to this complain any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount).

FIVE Million Dollars & MY CAR 2013
CHEVY CRUZE, LOSS OF APARTMENT
CLOTHES JEWELRY GLASSES FAMILY AIRLOOMS
ELECTRONICS SPOUSES PROPERTY
TRAMA PAIN & SUFFERING.

BI
case
status

VI. Previous lawsuits:

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?
Yes ☒ No ☐

B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff WEBSTER DRUMMOND

Defendants NASSAU COUNTY JAIL

2. Court (if federal court, name the district; if state court, name the county) NASSAU COUNTY JAIL EASTERN

3. Docket or index number 19-CV-272 (WFR)

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes ☐ No ☒

If NO, give the approximate date of disposition DISMISSED

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) CASE DISMISSED

Other
claims

C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?
Yes ☒ No ☐ THIS ONE

D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes ☐ No ☐

If NO, give the approximate date of disposition _____

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

WEBSTER DRUMMOND 441 1808096
1500 HAZEN ST E. ELIZABETH 11270
(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

-against-

4TH DIST NASSAU COUNTY
MINEOLA NY 11501
OFFICERS (1) JOHN DOE (2) JOHN DOE
(3) JOHN DOE (4) JOHN DOE
(In the space above enter the full name(s) of the defendant(s)/respondent(s).)

Civ. 00
REQUEST TO PROCEED
IN FORMA PAUPERIS

1. WEBSTER DRUMMOND (print or type your name) am the plaintiff/petitioner in the above entitled case and I hereby request to proceed in forma pauperis and without being required to prepay fees or costs or give security. I state that because of my poverty I am unable to pay the costs of said proceeding or to give security therefor, and that I believe I am entitled to redress.

1. If you are presently employed:
- a) give the name and address of your employer
 - b) state the amount of your earnings per month

2. If you are NOT PRESENTLY EMPLOYED:
- a) state the date of start and termination of your last employment
 - b) state your earnings per month
- YOU MUST ANSWER THIS QUESTION EVEN IF YOU ARE INCARCERATED.
- NONE

3. Have you received, within the past twelve months, any money from any source? If so, name the source and the amount of money you received.

N/A

- a) Are you receiving any public benefits? ☒ No. ☐ Yes. \$ _____
- b) Do you receive any income from any other source? ☒ No. ☐ Yes. \$ _____